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U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 1:16-cr-00231-RWS
DEFENDANT JAMES FRALEY	TYPE OF PROCESS Deposit/ Restoration

SERVE  
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONFISCATE  
Real property known as 2271 Johnson Road, Chickamauga, Georgia 30707,  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

CLERK'S OFFICE  
F.D.C. - Atlanta

APR 23 2025

KEVIN P. WEIMER, Clerk  
Deputy Clerk

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Sekret T. Sneed  
Assistant United States Attorney  
75 Ted Turner Drive SW, STE 600  
Atlanta, GA 30303

Number of process to be  
served with this Form 285Number of parties to be  
served in this caseCheck for service  
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,  
All Telephone Numbers, and Estimated Times Available for Service):

Please release and hold the net proceeds from the sale of the real property located at 2271 Johnson Road, Chickamauga,  
Georgia 30707 into the Asset Forfeiture Fund and hold for restitution.

16-FBI-004145

Signature of Attorney other Originator requesting service on behalf of

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

DATE

(404)-581-6000

5/16/2024

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total  
number of process indicated  
(Sign only for USM 285 if more  
than one USM 285 is submitted)

Total Process

3

District of  
Origin

No

19

District to  
Serve

No

19

Signature of Authorized USMS Deputy or Clerk

Date

5/17/24

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the  
individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Date

4/23/25

Time

7:57

☒ am  
☐ pm

Address (complete only different than shown above)

Signature of U.S. Marshal or Deputy

REMARKS

Costs shown on attached USMS Cost Sheet &gt;&gt;

Restoration payment made

MAY 17 2024 7 48 16 AM '24